

## **Applicati n Data Sheet**

### **Applicati n Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	ARTHROSCOPIC TISSUE SCAFFOLD DELIVERY DEVICE
Attorney Docket Number::	022956-0239
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	2
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Keith
Middle Name::	M.
Family Name::	Orr
City of Residence::	Boston
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	7 Dwight Street, Unit #5
City of mailing address::	Boston
State or Province of mailing address::	MA

Postal or Zip Code of mailing address:: 02118

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Eric  
Family Name:: Hyman  
City of Residence:: Ashland  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 332 Main Street  
City of mailing address:: Ashland  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01721

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Francois  
Family Name:: Binette  
City of Residence:: Weymouth  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 45 Sherricks Farm Road  
City of mailing address:: Weymouth  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02188

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Ian

Middle Name:: D.  
Family Name:: McRury  
City of Residence:: Medway  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 47 Oakland Street  
City of mailing address:: Medway  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02053

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Steve  
Family Name:: Lepke  
City of Residence:: Wakefield  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 2 Wicker Lane  
City of mailing address:: Wakefield  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01880

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Ash  
Family Name:: Perkins  
City of Residence:: Natick  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 14 Fisher Street

City of mailing address:: Natick  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01760

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Julia  
Family Name:: Hwang  
City of Residence:: Wayland  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 15 Rice Spring Lane  
City of mailing address:: Wayland  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01778

**Correspondence Information**

Correspondence Customer Number:: 021125

**Representative Information**

Representative Customer Number:: 021125

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